

Поэтому снизить риск влияния никотина на плод можно с помощью проведения разъяснительных бесед о вреде табакокурения не только с беременными женщинами, но и с девушками подросткового и фертильного возраста.

*Литература*

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## CROSS CULTURAL INTERACTIONS: PROS AND CONS

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**Introduction.** Culture, traditions, languages are the foundations upon which people's identity are build. There are instances where different cultures interact. The effects of these interactions is important to avoiding some misunderstandings and then knowing better some aspects of different cultures.

**Objective.** Show the effects of cross cultural interactions, the challenges faced and the ways to overcome them.

**Materials and methods.** System approach, analytical, logical and method of description.

**Results.** As a result of globalization interactions between different cultures have increased. Many people are travelling into other countries or working and studying.

There are many challenges faced by those who engage in cross cultural interactions. Culture shock is one of the major effects of this interaction. A person may have an experience when one moves to a cultural environment different from one's own. One of the main places where cross cultural interactions occur is at educational institutions where foreign students have a chance to learn about the native culture of the land they study in. Miscommunication is one of the key challenges.

There are several advantages of these interactions. Building of social cohesiveness, encouraging of interculturalism and racial integration. These help us to successfully communicate and achieve goals that would have been unable to achieve by one culture only. It allows blossoming of new ideas and inventions with the collective influence of different cultures.

«Every good has a dark side»; although there are advantages of cross cultural interactions, there are also disadvantages. Social inequality, cultural misunderstanding, racism, religious conflicts color discrimination and cultural

assimilation are some of the major disadvantages seen in modern societies which interact cross culturally.

We should developed our cultural competence to build understanding between people, to be respectful and open to different cultures.

**Conclusion.** Overall, cross cultural interactions are inevitable in modern ages due to the rapid globalization. We have to interact with an open mind and with the willingness to explore and get out of the comfort zones. The challenges of these interactions can be overcome through the power of friendship and unity.

As Catherine Pulsifer said: «We are all different, which is great because we are unique». Cultural competence is an important factor that influence in our capacity for successfully communicate with people from different cultural environment.

## PECULIARITIES OF ENTEROVIRUS NEURAL INFECTION

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**Relevance.** The problem of nonpolio enterovirus infection (NPEVI) is extremely urgent for the Republic of Belarus (RB). Infections caused by enteroviruses are among the most common forms of infectious diseases of the central nervous system (CNS).

**The purpose of research.** To characterize all forms of infections the central nervous system caused by enteroviruses among hospitalized patients in Grodno State Clinical Hospital of Infectious Diseases during 2016-2018.

**Materials and methods.** The material of our study were cases records of the patients the Grodno State Clinical Hospital of Infectious Diseases with neuroinfections caused by enteroviruses in 2017-2018. There were researched 40 laboratory-confirmed cases of neuroinfections of the enteroviral etiology of treated patients in the State Clinical Hospital of Infectious Diseases for 2016-2018.

**Results.** There were 27 children (67,5%), boys – 12 (44%), girls – 15 (56%) and 13 adults (32,5%), men – 8 (62%), women – 5 (38%). The average age of children is 6 years and 8 months. The average age of adults is 33 years 6 months. There were registered 5 forms of infectious diseases of the central nervous system of infectious diseases caused by enteroviruses : aseptic meningitis – 25 persons (62,5%); meningoencephalitis -11 persons (27,5%); encephalitis – 2 persons (5%); cerebellite - 1 patient (2,5%); meningoencephalomyeloproliculoneuropathy – 1 patient (2,5%). Consequences of the diseases were: complete recovery was diagnosed in 30 patients (75%); persistent convulsive syndrome was diagnosed in 4 patients, which was 10% ; long-term rehabilitation was required for patients with paraparesis (1 patient -2,5%), central tetraparesis (1 patient – 2,5%); persistent atonic-astatic syndrome was detected in 2 patients (5%); damage to the brain stem and cerebellum was detected in